21304 11292			State of Ne Investig		Mo	tor Ve	ehicl	e A	ccid	en	ıt Re	port	!	Shee	 et1	of _	4
3	Total Nur of Vehic		Local No./ District 071		Agency Case No. B	3-11581	3			ı	HIT & RUN	<b>I?</b> <b>X</b> > NO	INVESTIGA	ATION I		NO	? L 1
A/1 <b>01</b> A/2	DATE OF ACCIDENT PLACE		6/2013		Y Y	S M T	W TH	F S	TIME OI ACCIDE POLICE NOTIFIE	NT	1913 1914	itary Time)	STATE US	E ONLY	,		
В	OF ACCIDENT	CITY	Lincoln								PRIVATE	YES NO	12/16		13		
35	ROAD OF		STREET/	o. P Stree	 et						PROPERT ONE-WAY	YES NO	LATITUDE				
с 4	DISTANCE	FROM	FEET	N	S E \	OF MILEPOS	т		HIGH	NAY I	STREET? NO.	<b>X</b> O	LONGITUE	ΣE			-
D	MILEPO		IF AT INTERSE						T AT INT								
1 V1/M	NAME OF INTERSECTING ROADWAY  FEET MILES N S E W OF NEAREST STE										EAREST STREE	T, BRIDGE	, RAILI	ROAD C	ROSSING	3	
10 V2/M	MILES		IF N S E	ACCIDENT V W AND MILES	VAS OUTS	SIDE CITY L	IMITS, IN	w OF	DISTANCI NEAREST Y OR TOWI		OM NEAR	EST TOWN					
01 E 2																	
<u>-</u> F	DD11/ED			'		١	/EHICLE	NO. 1				OTATE		$\equiv$			]
<b>1</b>	DRIVER LICENSE DRIVER Jennifer		vo.						PHONE 4027	719	7633	STATE (Of License)	LOCAL NO		EX 🐣	⇒ FEMALE ⇒ MALE	
5	DRIVER ADDRE	SS	kup Dr, Linco	olo NE 6		STATE, ZIP			102	, , ,	7000	DATE OF BIRTH (MM / DD / YYYY	11/01		 77		V1/1
V2/N 1	OWNER			OIII, INC. C	0022				PHONE	710	7633	(MM / DD / YYYY	LOCAL NO	O.			18 V1/2
G	MARIA OWNER ADDRE	SS		DOINT A		STATE, ZIP			402		ITATION	X YES	04-10	NO.			18
2	LICENSE PLATE	36 S RIVER ST, WEST POINT, NE 68788  PENDING NO  YEAR (Plate Expires) 2014									LB40	STA	TE	NE	V1/3		
5	VEHICLE		YEAR	MAKE		MODEL		BODY ST			COLOR	  E	STIMATED [	(Of PI	E .	INE	V1/4
V1/O <b>1</b>	VEHICLE ID		2002 //ZU73E22U	Ford 424528		Explorer	<u>r                                      </u>	iviedi	um/larg	je t	INSURANC	E COMPANY	TOTALE	.D Ф	300		V1/5
V2/O	NO. (VIN)	1111	NZO / OLZZO	A24020	TOWED BY						POLICY NO						18
4						\	/EHICLE	NO. 2			1131	77683					<sup>V1/6</sup> <b>35</b>
1	DRIVER LICENSE	ı	No. H13276	372								STATE (Of License)	NE	SE	EX X	FEMALE	
V1/P	ANTON (	C HAS	SSEBROOK						PHONE 402	870	0661		LOCAL NO	V2/1			
V2/P	DRIVER ADDRE		Lincoln, NE	68503	CITY,	STATE, ZIP						DATE OF BIRTH (MM / DD / YYYY	04/24	18			
1	KATE F	BORC	HMAN / Ch	nuck H Ha	ssebro	ok			PHONE 4026	587:	2238	1.	05-04	18			
<sup>ງ</sup> 01	OWNER ADDRE		ns, NE 680	38	CITY,	STATE, ZIP			•	C	PENDI	YES NG X NO	CITATION	V2/3			
V1/Q	LICENSE PLATE	PA ı	No. 31B312								YEAR ate Expires)	2014		STA' (Of Pl	TE late)	NE	V2/4
4 V2/Q	VEHICLE	YEAR	1997	MAKE Nissan	1	MODEL XGU		BODY ST	or Seda	an	color		STIMATED I		E		V2/5
1	VEHICLE ID NO. (VIN)	1N4	AB41D6VC								INSURANC	ers Mutual					18
к 02	TOWED TO  Capital T	Tow			TOWED BY	al Tow					POLICY NO	l.					35
	<u>.</u>	Comp	lete this se	ection fo	r all inj	ured pe	ersons					OF BIRTH	Seat Position	<b>2</b> Eject	Body	Injury Sev.	5 SEX M F
VEH. #	NAME	(00///	prote a communic		DRESS	mee were m	ijui ou j				(******		Position	,,,,,,	Region	Sev.	
	LOCAL NO.		MEDICAL FACILITY	NAME			EMS SE	ERVICE NAM	1E				EMS RU	N REPO	DRT NO.		
VEH. #	NAME			AD	DRESS					$\top$							
	LOCAL NO.		MEDICAL FACILITY	NAME			EMS SE	ERVICE NAM	1E				EMS RU	N REPO	DRT NO.		
VEH. #	NAME			AD	DRESS					$\top$					Τ		
	LOCAL NO.		MEDICAL FACILITY	NAME			EMS SE	ERVICE NAM	1E				EMS RU	N REP	ORT NO.		

			THE EC	OL L OWIN	G INFO	RMATIO	N IS REQUIRED	) FOR	ALL ACCIDE	NTS					
			THE PC	JLLOVVIIN			BY DIAGRAM WHAT		IED AC	SENCY CASE	NO.				
									. <u>E</u>	33-1158	13				
No	cate orth trrow					٠									
				N N			Not	To So	cale						
			Measurement	s Are Approxi	mate										
			. 13' S of I	POI #1 N curb of P St urb of N 22nd				-							
			· 12' N of S	POI #2 S curb of P St urb of N 22nd			P.O.I. #1	-	P St						
	٠			width = 30' St width = 30'		_	2			<del></del> .					
-	٠					_	3	P.O.I. #	<u> </u>						
٠						_		,	1						
							1		N 22nd St						
	•		-												
<b>Z</b> OBJI	ECT DAMA	GED	OWNER NAME			ADDRESS			PHONE		APPROX	. COST OF	DAMAGE:		
OBJ	ECT DAMA	GED	OWNER NAME			ADDRESS			PHONE		APPROX. COST OF DAMAGE				
SSES	E					ADDRESS					PHONE				
MINESSES	E					ADDRESS					PHONE				
		MOVEMENT		POINT OF IM			AIRBAG DEPLOYE	D	RESTRAINT USE VEHICLE 1	, ,	OTAL VE		/EH 1		
	SEW	2012.02	(Ente	MOST DAMA er numbers fo			VLINGLE I	$\exists \vdash$	VEHICLE I	ALC	OHOL Drive	er Drive	Pedes-		
1	x	N 22nd St	VEHI	CLE 1	VEHI	CLE 2	4		2	ALCO	TING No.	1 No. 2	Y		
2	X	P St	POINT OF IMPACT	03	POINT OF IMPACT	01	1 Deployed - front 2 Deployed - side	2 La	lone used - vehicle occu ap & shoulder belt used	ipant TES		X N X	N		
1 (	)1	06 Turning left 07 Making U-tu	MOST DAMAGED AREA	03	MOST DAMAGED AREA	01	<ul><li>3 Deployed - both front/s</li><li>4 Not deployed</li></ul>	side 4 La 5 C	choulder belt only used ap belt only used child safety seat used	-	LCOHOL/	Driver	Driver		
2 (	)1	08 Entering traffic lane	00 None	02	03	04	5 Not applicable/ No airbag available	6 C 7 D	child booster seat used OT approved helmet used costume helmet used	he:	DRUGS JSPECTED	No. 1	No. 2		
01 Essentially 09 Leaving straight ahead traffic lane			09 Top & v	vindows	7	05	6 Unknown VEHICLE 2		estraint use unknown  VEHICLE 2	1 No	either alcohol r		uspected		
03 Cha	02 Backing 10 Parked 03 Changing lanes 11 Slowing or		11 Total (a	Il areas)				$\exists \mid \vdash$		3 Ye	es - alcohol sus es - drugs susp	pected			
04 Ove Pass	sing	stopped in to	ianic 12 Other	08	07	□ 06	5	_      -	2	1 1	es - alcohol & d nknown	ırugs suspe	ected		
OFFICE 170		13 Unknown	TROOP/ TEAM/ BEAT <b>7</b>			DEPARTM Linco		—_ı_ ment	·		Photogr taken?	aphs 🔾	→ YES		
INVEST	IGATOR N	AME (Print or Type				I GATOR SIGNA	TURE			DATE		/16/201			
An	nela M	orehouse			∧nr	round hi	Officer Angela I	Maraha	1100	REPO		ハロノリ	i O		

	13047	529		State of N		Motor	· Vohio	ام ۸	ccidor	ot Co	nt	tinuati	on Rep	ort	Chast	. 3	} _4	4	
1	1292			Local No./	jaioi s	IVIOLOI	veriic	Agency	CCIUEI	it CC	וווע	ıııuaıı	on Kep	Οιι	Sneet		TE USE C	DNLY	=
				District 071				Case No.	B3-115	813									
Vehicle Codes		DATE 2/16/20		ENT (MM/DD/	(YYY)	PLACE OF	COUNTY		caster										_
from Overlay	/					ACCIDEN		ncoln										Seque of Ev	
#2 <b>VEH.</b> #		D ON WI	HICH ACCII	DENT OCCUR	RED STRE	EET/HIGHWA		Street /EHICL										VEH	
3		IVER ENSE	NO.	H135537	 '49			2					STATE (Of License)	NE	SE	ς ς	FEMAL MALE	.E 3	
M	DRIVER	2		SCHULTE						PHONE 4028	10.	7075	(Of License)	LOCAL		<u> </u>	MALE	1.	_
01	DRIVER	R ADDRES	SS	AVE, LIN		CITY, S	STATE, ZIP			4020	40	7075	DATE OF BIRTH	ng/	13/197			Ľ	
<sup>N</sup>	OWNER	?		SCHULTE		00000				PHONE 4028	40	 7075	(MM / DD / YYYY	LOCAL				2.	
° 3	OWNER	R ADDRES	SS	e, Lincoln			STATE, ZIP			1.522	С	ITATION	YES	1	ON NO.	<u> </u>		3.	
P 1		ENSE P		TDY305	, 142 000	300						YEAR ate Expires)	2014		STAT (Of Pla		NE	4.	_
Q		HICLE	YEAR	10	MAKE Honda		ODEL Civic		BODY STYL		n	color			D DAMAGE		0	5.	_
1		CLE ID	19XFA1	F52AE04	 ·1979	I			1			INSURANCE						18	i —
	Car					TOWED BY	Tow					POLICY NO. 210616	720261FF	PDAN	JF			°. 35	,
VEH. #		ntai it	J V V			Oupital		/EHICL	E NO. 4			210010	77 2020 11 1	1 7 (1	<u> </u>			VEH	l. 3
4	LIC	IVER ENSE	NO.										STATE (Of License)		SE	K -	→ FEMAL → MALE	E 4	
M	DRIVER									PHONE				LOCAL	NO.			1.	_
N		R ADDRES				CITY, S	STATE, ZIP						DATE OF BIRTH (MM / DD / YYYY					2.	_
0	OWNER									PHONE				LOCAL				3.	_
O	OWNER	R ADDRES	SS			CITY, S	STATE, ZIP					PENDIN	YES IG NO	CITATI	ON NO.			J.	
Р		ENSE ATE	NO.									YEAR ate Expires)	1=-		STAT (Of Pla	te)		4.	
Q	VE	HICLE	,	/EAR	MAKE	IVI	IODEL		BODY STYI	.E		COLOR			D DAMAGE			5.	_
		CLE ID										INSURANCE	COMPANY					6	_
	TOWED	TO				TOWED BY						POLICY NO.							
,		E MOV			POINT OF I	MPACT AN		AIRI	SAG DEPL				AINT USE		TOTAL CUPANTS	VE 3	H 1	VEH 4	
VEH NO.	SEV		ROAD OR HWAY NAME	_	nter numbers									AL	COHOL		ver No.	Driver N	۷o
3	X	P St		VEHIC	CLE 3	VEHIC	LE <u>4</u>		1			2		AL	COHOL	Υ		Υ	_
4				POINT OF IMPACT	08	POINT OF IMPACT			loyed - front		2	Lap & shoul	vehicle occupan der belt used	t L	EVEL ESTED	N	Х	N	
3	01	06 T	urning left	MOST DAMAGED AREA	08	MOST DAMAGED AREA		3 Dep	loyed - side loyed - both deployed	front/side	4 5	Shoulder be Lap belt only Child safety	y used seat used	BAC	LEVEL	Dri	ver No.	Driver N	Vo.
4		07 M 08 E	laking U-turn intering					5 Not No	applicable/ airbag availa	ble	7	Child booste DOT approv Costume he	ed helmet used	[	COHOL/ ORUGS	<u> </u>	3_	4_	_
01 Ess	entially	09 L	affic lane eaving affic lane	00 None 09 Top &		02   03	04	6 Unk	nown VEHICLE _4	4	9	Restraint us	e unknown	- 1	SPECTED  Neither alco			suspecte	
02 Bac 03 Cha	king anging lai	10 P	arked lowing or	10 Underd	° 01	1- (	05		-					2	Yes - alcoho Yes - drugs	ol sus	pected	Suspecie	u
Pas	ertaking/ sing ning right	12 C	topped in trat Other Inknown	ffic 12 Other	, –	08   07	06	-				-		4	Yes - alcoho Unknown			pected	
00 1011	iiig rigiti			e this se	ction fo	r all ini	ured pe	rsons			'		OF BIRTH	1 Se	ot	3 Body	4 Injury	5 s	
	NAME					DDRESS					$\vdash$	(MM / E	DD / YYYY)	Posit	tion Eject	Regio	n Sev.	Trans. N	1 1
VEH. #	LOCAL	NO.	ME	DICAL FACILITY N	JAME			EMS SE	ERVICE NAME					EMS	RUN REPOI	RT NO			
	NAME				IA .	DDRESS					Т			+					_
VEH. #		NO	I NACC	DICAL FACILITY N				EMC C	ERVICE NAME	:				EMC	RUN REPOI	ST NO			_
			IMEL	DIONE FAUILITY N				EINIO OF	-TOTOE NAME	-				EMIS	NON REPUI	VI INO			
VEH. #						DDRESS													
	LOCAL	NO.	ME	DICAL FACILITY N	IAME			EMS SE	ERVICE NAME					EMS	RUN REPOI	RT NO			

	ADDITIONAL - DIAGRAM & INFORMATION AS REQUIRED FOR ACCIDENT  AGENCY CASE NO.																			
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1704			-	TROOP/ TEAM/ BEAT <b>7</b>					ln Polic	e Depa	rtment	•								
	TOR NA	AME (Print or				IN	VESTIGATO													
										Angolo	Marah	001100			DATE O	F   12/	16/201	3		
Angel	a IVIC	orehouse	<del>-</del>			'	Approv	eu by	Officer	Angela	iviorer	iouse			KEPOR	'   '-/	10/201	J		